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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. 70802.01 **Attorney Docket Number DECLARATION FOR UTILITY OR DESIGN** First Named Inventor Segal PATENT APPLICATION **COMPLETE IF KNOWN** (37 CFR 1.63) **Application Number** ✓ Declaration Declaration Submitted **OR** Submitted after Initial Filing Date Filing (surcharge (37 CFR 1.16(e)) With Initial Filing

Group Art Unit

Examiner Name

My residence, post office address, and c		ted below next to my name	ı .					
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Mechanical Apparatus and	Method for D a Site o	ilating and Deliveri f Treatment	ng a Therape	eutic Agent to				
(Title of the Invention)								
the specification of which is attached hereto	+							
was filed on (MM/DD/YYYY)		as United State	s Application Nu	mber or PCT International				
Application Number	and was a	mended on (MM/DD/YYY)	7	(if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
I acknowledge the duty to disclose inform in-part applications, material information of PCT international filing date of the continuous continu	which became avails	ble between the filing date						
I hereby claim foreign priority benefits under 35 U.S.C 119 (a)-(d) or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached? YES NO				
	'							
Additional foreign application number	rs are listed on a su	pplemental priority data she	et PTO/SB/02B	attached hereto:				

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SOLE OR FIRST I	NVENTOR:	A peti	ition ha	s been filed for this	unsign	led inventor			
Given Name Je (first and middle [If any])	Terome Family Name								
Inventor's Signature				Plantyre		Date 11/29/01			
Residence: City Chevy Chas	se s	State MD		Country US		Citizenship US			
Mailing Address 6132 Western Avenue									
Mailing Address									
City Chevy Chase	State MD		ZIP	20815		Country US			
NAME OF SECOND INVENT	OR:		Ap	etition has been file	ed for th	nis unsigned inventor			
Given Name (first and middle [if any]) Neal Or Surname Scott									
Inventor's Signature	Scott	W	<u> </u>			Date 11/29/01			
Residence: City Houston	St	tate TX	(Country US	,	Chizenship US			
Mailing Address									
Mailing Address 4011 North I	Beechwood D	rive							
city Houston	State TX		ZIP	77059		Country US			
Additional inventors are being named	d on the suppler	mental Additio	nai Inve	entor(s) sheet(s) PTO/	VICR/02A	attanhad harata			

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